This portion MUST be returned with your payment to ensure proper credit. THANK YOU

ACCOUNT BILLED PROJECT NAME			PROJECT ID	
SRS MINING	FLAKE 1			S270019
DUE DATE ANNUAL FEE AMOUNT QUE	FEE NOT ENCLOSED	Change of Address		
10/30/2000 \$ 100 \$ 100 TAX ID OR SOCIAL SECURITY #	Permittee requests an inspection to close out this permit.	Contact RECEIVED		ED
\$100, ENCLOSEL		Address	OCT 0 6 2000	
DIVISION OF OIL GAS AND MINING 1594 WEST NORTH TEMPLE SUITE 1210		DIVISION OF		
		OIL, GAS AND MINING		
PO BOX 145801	State Zip			
SALT LAKE CITY UT 84114-5801		Phone		

Please make check payable to: Division of Oil, Gas and Mini